United States District Court	Shorts Shorts	STANDED IN	Service S
------------------------------	------------------	------------	-----------

N	for the orthern District o		1025 JUL 17 A 11:10
	Eastern	_ Division	U.S. DISTRICT COURT N.D. OF ALABAMA
Del'Rico Je'pin Cortez, Pro se)	Case No.	1;25-cv-877-CLM
Plaintiff(s) (Write the full name of each plaintiff who is filing this confit the names of all the plaintiffs cannot fit in the space ab please write "see attached" in the space and attach an ac page with the full list of names.) -V- Kelly Turner, et al.,	ove,	Jury Trial:	(to be filled in by the Clerk's Office) (check one) Yes No
Defendant(s) (Write the full name of each defendant who is being sued names of all the defendants cannot fit in the space above, write "see attached" in the space and attach an addition with the full list of names.)	please)		

COMPLAINT FOR A CIVIL CASE

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Del'Rico Je'pin Cortez	
Street Address	3008 Gurnee Ave.	
City and County	Anniston (calhoun)	
State and Zip Code	Alabama 36201	
Telephone Number	470 772 4363	
E-mail Address	sots1812@gmail.com	

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

Defendant No. 1

Name Kelly Turner, MS, ADC

Job or Title (if known) Administrative Director

Street Address 608 Martin Luther King Jr. Dr.

City and County Hobson City (Calhoun)

State and Zip Code Alabama, 36201

Telephone Number 256 832 0100

E-mail Address (if known)

E-mail Address (if known)

Defendant No. 2

Name Barbara J. Hanna ,MD.

Job or Title (if known) Exective Physician

Street Address 608 Martin Luther King Jr. Dr.

City and County Hobson City (Calhoun)

State and Zip Code Alabama ,36201

Telephone Number 256 832 0100

Defendant No. 3

Name Sonia Preston ,CRNP

Job or Title (if known) Director of HIV care services

Street Address 608 Martin Luther King Jr. Dr.

City and County Hobson City (Calhoun)

State and Zip Code Alabama,36201

Telephone Number 256 832 0100

E-mail Address (if known)

Defendant No. 4

Name Bryan Hobson

Job or Title (if known) Clinical Office Manager

Street Address 608 Martin Luther King Dr. Jr

City and County Hobson City (Calhoun)

State and Zip Code Alabama,36201
Telephone Number 256 832 0100

256 832 0100 256 832 0100

E-mail Address (if known)

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What	is the ba	sis for f	ederal court jurisdiction? (check all that apply)	
	Fede	ral ques	tion Diversity of citizenship	
Fill o	ut the pa	ragraphs	s in this section that apply to this case.	
Α.	If the	Basis fo	or Jurisdiction Is a Federal Question	
	are at Juriso juriso 1973 distrio	issue in diction is liciction) . Venue ct.	fic federal statutes, federal treaties, and/or provisions of the Unit this case. Is proper under 28 U.S.C.sec.1331 (federal question),28 U.S.C. In 28 U.S.C. sec.1343(civil rights violations), and Section 504 of Its proper under @8 U.S.C. sec.1391, as all relevant events occ	sec.1367 (supplemental the Rehabilitation Act of
В.	If the	Basis fo	or Jurisdiction Is Diversity of Citizenship	
	1.	The P	laintiff(s)	
		a.	If the plaintiff is an individual	
			The plaintiff, (name)	, is a citizen of the
			State of (name)	
		b.	If the plaintiff is a corporation	
			The plaintiff, (name)	, is incorporated
			under the laws of the State of (name)	
			and has its principal place of business in the State of (name)	
			1 <u>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </u>	
		(If mo	ore than one plaintiff is named in the complaint, attach an addit information for each additional plaintiff.)	ional page providing the
	2.	The D	Defendant(s)	
		a.	If the defendant is an individual	
			The defendant, (name)	, is a citizen of
			the State of (name)	. Or is a citizen of
			(foreign nation)	

b.	If the defendant is a corporation	
	The defendant, (name)	, is incorporated under
	the laws of the State of (name)	, and has its
	principal place of business in the State of (name)	
	Or is incorporated under the laws of (foreign nation)	
	and has its principal place of business in (name)	
1 2	re than one defendant is named in the complaint, attach an addit nformation for each additional defendant.)	ional page providing the
The A	mount in Controversy	
	nount in controversy—the amount the plaintiff claims the defendation is more than \$75,000, not counting interest and costs of court, be	

III. Statement of Claim

3.

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

The Plaintiff initially enrolled in care with Health Service Center, Inc. in Febuary 2022. On November 07,2022, the plaintiff reported to Dr. Sonia Preston that a newly prescribed HIV medication caused serious side sffects and reequested to return to a previous regimen that had worked for nearly eight years. Dr. Preston denied the request and refused to discuss alternatives. Plaintiff's request to file a grievance was also denied.

continue on attachment @ Statement of claim(s) sec.3

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Plaintiff respectfullyrequests:

- -Compensatory and punitive damages in the amount of \$50,000,000
- -Declaratory and injunctive relief, including enforcement of grievance and treatment rights
- -Cost of this action
- -Any other relief this court deems just and proper

(Continued from Sec. iii) STATEMENT OF CLAIM'S

On December 13, 2022, Plaintiff sought to file another grievance, this time regarding Barbara Hanna and inappropriate medication switching between Biktarvy and Dovato. The plaintiff explained that it was the plaintiff's right to have some regards to what kind of medication he received Again, he was denied the right to file a grievance. Dr. Preston stated that patients had no right to dispute treatment decisions.

On January 19, 2023, Plaintiff received a termination letter from Health Service Center citing alleged behavior on December 13,2022, January 11,2023, and January 18,2023. This termination followed Plaintiff's efforts to assert his rights.

On February 15,2023, Plaintiff spoke with Bryan Hobson, who dismissed concerns over policy violations and reaffirmed Plaintiff's termination. Plaintiff's attempt to speak with Kelly Turner was denied.

On February 12,2024, Plaintiff contacted the clinic and spoke with Jackie Daramus requesting medical records. The request was denied.

On April 1,2025, while in custody, Plaintiff was taken to Health Service Center under the supervision of Calhoun county jail officials. He was told he would receive care only while incarcerated, and treatment would again be upon release.

On May 1,2025, plaintiff returned post-release and was informed by Dr.Sonia Preston that his CD4 count had dropped from 750 to 307. When he questioned the legality of reprisal under clinic policy, Dr.Preston responded, "We are not going to treat you.'

On May 15,2025, Plaintiff received medical records which appeared tampered with, omitting key grievance requests made on November 7,2022, December 13,2022, and January 11,2023. Only the January 18,2023 entry was reflected, which was followed by termination the next day.

From March 10,2025 to May12,2025, Plaintiff was incarcerated and was completely denied HIV treatment, despite Health Service Center being the designated provider. In total, Plaintiff was denied treatment for over two years and five months.

(continued from sec iii) Statement of Claims

The actions of the Defendants constitute:

- -Breach of contract and medical abandonment
- Retaliation for asserting patient rights
- -Denial of access to medical records
- -Falsification and suppression of medical records
- -Reprisal in violation of Section 504 of the Rehabilitation Act
- -Deliberate indifference to serious medical needs while incarcerated
- -Obstruction of legal redress and access to federally funded care

(continued from sec. iv) Damages

As a result of the Defendants conduct, Plaintiff suffered:

- -Emotional and psychological distress
- -Physical harm, includingCD4 count deterioration
- -Denial of medically necessary treatment for over 2 years and 5 months
- -Financial hardship and disruption of care
- -Loss of dignity and violation of federal protections

V. Certification and Closing

B.

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:	14/25
Signature of Plaintiff	DelRen Jepin Cortos
Printed Name of Plaintif	ff Del'Rico Je'pin Cortez pro Se
For Attorneys	
Date of signing:	
	· ·
Signature of Attorney	
Printed Name of Attorne	ey .
Bar Number	
Name of Law Firm	
Street Address	
State and Zip Code	
Telephone Number	
E-mail Address	

Delever de la comment 9 Filed 07/17/25 Page 8 of 8

3008 Gurnee Ave.

BIRMINGHAM AL 350

15 JUL 2025 PM 5 L

U.S. DISTRICT COURT
NORTHERN DISTRICT OF ALABAMA

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ALABAMA 460 GALISTIN STREET, S.W. Hundsville, Alabama 35801

3580i-491360

րինդորդիրիու Որուսաիրու արդերորդին ին արդերի